



Request to the City Council M& C# _____
ALCOHOL DISTANCE APPEAL APPLICATION
(Please Print or Type)

Name of Establishment _____ Location _____

Legal Description _____ Block/Ab _____ Lot/Tr _____

Owner of Establishment _____ Owner Signature _____

Owner Address _____ City _____ Zip _____

Owner Phone No _____ 2nd Ph No _____ Email _____

Name of School or Church < 300 ft / 1000 ft from the establishment _____

Has the School, Church, etc. been contacted or do you know of any opposition to this request? Yes ☐ No ☐

Is Alcohol Consumption: ON PREMISE ☐ or OFF PREMISE ☐ Type of TABC License(s) _____

Type of Business _____ Setback Measurement / Distance Requested _____ Is building leased? Yes ☐ No ☐

Building Owner / Lessor name _____ Lessor Signature _____

Lessor Address _____ City _____ Zip _____

Lessors Phone No. _____ 2nd Ph No _____ Email _____

Applicant Name (if other than Owner) _____

Applicant Address _____ City _____ Zip _____

Applicant Phone No. _____ 2nd Ph No _____ Email _____

ALCOHOL DISTANCE APPEAL PROCESS & REQUIREMENTS:

- ☐ Building Inspector, Ken McGowen (817-392-7834), (Rejection Letter and Measurements required PRIOR TO SUBMITTING).
- ☐ Processing time is approximately 4 weeks and the request will be heard at the appropriate City Council Hearing. Hearings are held at City Hall on Tuesdays and the applicant is required to be present.
- ☐ Summary of hardship and/or reason for requesting a DISTANCE APPEAL is recommended.
- ☐ Staff to provide Early Notifications to surrounding HOA's, Schools, etc., within a ¼ mile buffer of subject property.
- ☐ Staff will notify all property owners, neighbors, within a 300' buffer of subject property
(You may contact Council Members prior to the hearing to see if they approve or have received opposition for your case at <http://fortworthtexas.gov>)

**** At the hearing, "Speaker Request forms" must be completed and turned in to the staff desk upon addressing the City Council. Beginning April 1, 2011, the speaker request form must be turned in fifteen (15) minutes prior to the start of the meeting, and to register to speak before the meeting you may call 817-392-6150, fax 817-392-6196 or <http://fortworthtexas.gov>****

Application Fee Code 124 \$350.00	Received By: _____	Date _____	Hearing Date _____	Case # AA13- _____
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